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AUTHOR Zagelbaum, Adam; Alexander, Charlene; Kruczek, Theresa

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ABSTRACT

This paper discusses how students from a Master's Degree program in School Counseling offered support services to local schools on September 11, 2001, and immediately afterwards. These services included direct interventions provided to students, parents, school counselors and administrators, and indirect interventions in the form of providing resource materials to parents, school administrators, school counselors and teachers. The responses of children to such interventions are presented and recommendations for future services are offered. (GCP)



Running head: 9/11 SCHOOL BASED INITIATIVES

The 9/11 Tragedy: Some School-Based Initiatives

Adam Zagelbaum, M.S. Charlene Alexander, Ph.D. Theresa Kruczek, Ph.D.

Ball State University

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The 9/11 Tragedy: Some School-Based Initiatives

Intervention Types

Our department houses a Master's Degree program in School Counseling and as such we were in a good position to offer support services to local schools. Our outreach began immediately, the day of the tragedy. Our interventions can be divided into two broad categories, direct and indirect. Direct interventions involved those provided directly to students, parents, school counselors, and school administrators. Indirect interventions were most often in the form of providing resource materials to parents, school administrators, school counselors and teachers.

Direct interventions with students were provided in the form of counseling and therapeutic interventions. For example, at a local preschool there were several 3-4 year old boys who were demonstrating repetition compulsion in their play. They repeatedly were building towers with Legos and knocking them down with a toy airplane. This behavior persisted for several weeks following 9/11 and did not respond to support and redirection by the classroom teachers. We directly intervened with these children using play therapy techniques, in the classroom setting, to help them master their anxiety over the traumatic event. Additionally, group counseling opportunities were provided for parents through the township trustees office. These counseling sessions were advertised in the local paper, on public television, and local radio stations as public service announcements. The group sessions were available on a drop in basis and free of charge. Direct interventions with school counselors and administrators

The resource materials provided to parents, school administrators, and personnel as part of our indirect intervention efforts were offered through a variety of modalities.



The day of the tragedy we prepared handouts to send home to parents of children at the preschool and elementary school levels. These handouts were distributed via teachers and school counselors. We also contributed resource material for parents, teachers, and school counselors on our departmental website. Our faculty were interviewed by local and national media to provide guidelines for helping children cope across the developmental spectrum. These guidelines were presented in the print media as well as via radio and television modalities.

Initially, we meet with area principals and assistant principals to address signs and symptoms of stress in elementary, junior high and high school populations including teachers and other support staff. September 11 was coincidentally the first day of the Indiana Statewide Testing for Educational Progress (ISTEP). ISTEP, our state's educational performance assessment measure. Schools were given the option, by the state, to continue or defer administration. Interestingly the majority of schools chose to continue test administration in the interest of "maintaining a normal routine". Many parents and teachers expressed concern about their student's capacity to perform optimally given the circumstances. ISTEP is administered to students in grades 3, 6 and 10. These students had just starting testing when the tragedy occurred. Our area principals had questions about the validity of these exams given the level of emotional distress some students were experiencing.

Our faculty was asked to repeat our presentation at a second district wide meeting and later at the annual state meeting for principals and superintendents. The most beneficial part of these exchanges over the next few months with principals and superintendents was the time they took to listen to what strategies other schools had



employed and to exchange ideas about what activities worked well and were most beneficial. A secondary benefit was a deeper understanding of the roles of school counselors and counseling psychologist in schools.

Additionally, since our training program involves educators across the state, we used the classroom setting to provide consultative and support services. For example, in our Introduction to School Counseling course we dropped the regular curriculum for two weeks immediately following the tragedy and addressed crisis management techniques and ways to foster adaptive coping within their schools. Educators were able to use the university classroom setting to identify specific areas of coping difficulty within their school and develop intervention plans to address the problem(s). Interestingly, the coping difficulties addressed were not limited to students. Several administrators sought suggestions for helping teachers and parents cope.

Responses of Schools and Children

One of the greatest influences on children seemed to be their exposure to television media associated with the tragedy. A second media related influence was the impact of exposure on their parents and teachers. For example, in one of the local middle schools, on the day of the tragedy, a teacher watched television all day with her students. She identified this activity as a current events lesson. In retrospect, following conversations with this teacher, she acknowledged this behavior really stemmed from her own "need to know" and difficulties dealing with the event. Secondarily, though several students in her class showed significant symptoms of anxiety that needed to be addressed by their school counselor. At least one student was able to articulate that he "wished the teacher would have just turned off the t.v.".



Children's ability to manage the visual images associated with the tragedy, not surprisingly, followed developmental lines. Preschool children did not have the cognitive capacity to distinguish distance and time. When they saw the images repeatedly they were unable to determine the event was in the past rather than recurring. They also were not able to recognize the physical distance between themselves and the tragedy. When the images were on the television in their home they were highly salient and traumatic, especially when viewed repeatedly.

Older elementary school students were able to cognitively understand the distance between themselves and the event as well as understand the event happened in the past when later exposed via visual media. However, these students did not possess the emotional maturity or coping skills to manage the anxiety generated by the event. These children's stress responses seemed mitigated by the level of anxiety and coping displayed by the significant adults in their lives, parents and teachers. The level of exposure to the event and its aftermath seemed correlated positively with anxiety reactions in these children. That is, greater exposure led to higher levels of anxiety.

With middle school and high school students the media saliency effects to the actual event seemed less as they had good cognitive capacity to understand distance and time. However, older students possessed increased awareness of the broader social and political ramifications of the event. In particular, when talk shifted to war, several high school boys reported fear they would be "drafted" into a war. This seemed to be an especially strong fear for several young men whose fathers had been drafted to serve in Vietnam. This heightened awareness of the broader implications seemed to result in increased feelings of anxiety and depression in a subset of adolescents. This age of



students also possessed greater capacity for empathy with the survivors and family members of the victims. They often had strong reactions to the stories of these individuals.

Schools displayed a variety of both immediate and longer term responses to the tragedy. Initial responses most often involved enacting crisis plans, some of which served to alleviate student anxiety and some of which exacerbated anxiety. Several local schools went to "lock down" status. While this was their crisis plan, in most instances the threat was a perceived vs. real threat and in the former cases this status served to heighten both teacher and student anxiety. There were several cases where there were hoax threats and in these instances enactment of the crisis plan certainly seemed warranted.

Future Recommendations

First, we recommend limiting media exposure, particularly visual and auditory, with all children. Preschool age children (below age 6) should not have any media exposure. They do not have the cognitive capabilities to manage the images. Elementary school age children, in general, should have *significantly* limited exposure (particularly 6-8 years) with an adult present to explain and describe the situation in developmentally appropriate terms. The adult should also monitor the child for any signs of anxiety and intervene to assist the child in coping with the anxiety. Children middle school age and beyond are going to be more aware and curious about tragedies. They should be provided with opportunities to discuss their reactions (both at home and within the school setting) and supported to cope adaptively with their personal reactions to the tragedy. These types of events can be used with older children to foster empathy and



understanding for survivors and victims. These discussions can be integrated within existing curriculum as appropriate.

Following any tragedy it is important to balance the need to maintain established routines and schedules with the individual needs of children. Established routines offer children a sense of stability and predictability, which in turn helps minimize their anxiety. However, it is necessary to examine the practicality of the routine in times of crisis. Certain children, particularly those already at increased risk for anxiety and depression, will need modifications to the usual routine in order to effectively cope with the crisis. For example, it is likely certain student's performance on the ISTEP testing was adversely impacted by the events of 9/11. It would be important to compare last year's results to previous years in order to ascertain the reliability of administration under these types of circumstances.

Finally, offering children opportunities to support victims and their families seemed to be important. Several schools collected funds for both children affected by the tragedy in New York City as well as children in Afghanistan. Other schools supported the Red Cross. In all instances the local children's efforts to help others directly impacted by the tragedy seemed to empower them and re-establish a sense of hopefulness.



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